APPLICATION FOR PARTIAL PAYMENT OF CONTRACT

	Project Title: 1-35/1st Street & NE 36th Street Final Design						
city of	Contractor: Howard R Green Company						
Ankeny	Address: P.O. Box 4764 Des Moines, IA 50306-4764						
bringing it all tagether	Finance Budg		954.3954.42		inance Project		954.4210
	at anomalous and a second	ct or Invoice #:	: (523270J0			
	Original Cont		December			or#	5531
						-	
Date of Council Meeting	4/5/2010	0			PAYMENT RE	QUEST#	1
		ENT PERIOD:	From:	01/30/			02/26/10
				- 1133			
Contract Summary							
Original Contract Amount:		\$ 1,0	50,000.00				
Net change by Change Orders:		\$	-				
Contract Amount to Date: (line 1	± 2)			\$	1,050,000.00	NY	
			-			•	
Total completed and stored to d	date:	\$	46,788.65				
Retainage:0 % of Cor	npleted Work:	\$	-				
Total Earned less Retainage:			_	\$	46,788.65	_	
Less previous applications for p	ayment:		_	\$	=		
SUBTOTAL						\$	46,788.65
OTHER CHARGES (Please attack	n an itemized list)					\$	Y <u>u</u>
CURRENT PAYMENT DUE						\$	46,788.65
Balance to finish, including reta	inage:		_	\$	1,003,211.35	•0	
Contract Time Remaining (If app	licable)						
The undersigned Contractor certifies that to the	he hest of the Contractor	's knowledge informat	tion and belief the	work covere	ed by this Application fo	r Payment has	been completed in
accordance with the Contract Documents, the	at all the amounts have b	een paid by the Contra					40. Marie M. C. Sharet 1997. A 1996 (1996) 1996.
received from the Owner, and that current pa		ow due.					
Construction Contractor Approv	/al: Firm Name				100000		
Signature						Date	
Engineer/Consultant Approval:	Howard R. Gre	en Company					
m. 1 m 11.	Firm Name					2/201	la
Signature						5/26/I	10
974 • 000 00 00 00 00 00 00 00 00 00 00 00						Date	1
City of Ankeny Staff Approval	/ \					a-1	1/10
Signature		,			•	Date	1
	1						
Submit to: Doub	Moritz D.E. Duki	in Works Direct	or 220 M/ E	iret Strac	ot Ankony IA	50023-175	1
Submit to: Paul i Email: pmoritz@ank	Moritz, P.E., Publi			963-3522			3-3535
Linaii. pinoniz@ank	criyiowa.gov	Phon	16	903-3322	Fax:	90	0-0000

APPLICATION FOR PARTIAL PAYMENT OF CONTRACT

#	Date	Amount	#	Date	Amo
1	\$	(=	51		
2	\$	-	52		
3	\$		56		
4	\$	•	54		
5	\$	7-8	55		
6	\$		56		
7	\$		57		
8	\$		58	77	
9	\$		59		
10	\$		60		
11	\$		61		
12	\$		62		
13	\$		63		
14	\$	-	64		
15			65		
16			66		
17			67		
18			68		
19			69		
20			70		
21			71		
22			72		
23			73		
24			74		
25			75		
26			76		
27			77		
28			78		
29			79		
30			80		
31			81		
32			82		
33			83		
34			84		
35			85		
36		•	86		
37			87		
38			88		
39			89		
40			90		
41			91		
42			92		
43			93		
44			94		
45			95		
46 —			96		
17			97		
18			98		
19			99		
	- Name of the last		100		

TOTAL

Date	Amou	ınt
	8	
		34
TAL	S	=
	TAI.	TAI e

Contract Time Remaining:	
CONTRACT PERIOD:	CLICK TO CHOOSE
Original Contract Date:	December 21, 2009
Original Contract Time:	
Added by Change Order:	
Contract Time to Date:	0
Time Used to Date:	
Contract Time Remaining:	0